

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO. 09/101508 | FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER		AFTER		CLAHMS
	1st AMENDMENT	2nd AMENDMENT	IND.	DEP.	
IND.	DEP.	IND.	DEP.	IND.	DEP.
1					
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50					
TOTAL INC.					
TOTAL DEP.					
TOTAL CLAIMS					

IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL INC.					
TOTAL DEP.					
TOTAL CLAIMS					

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